



American Dental Association
www.ada.org

March 26, 2007

A Letter Regarding ADA's "Interim Guidance on Fluoride Intake for Infants and Young Children"

The American Dental Association continues to endorse community water fluoridation as a safe, beneficial and cost-effective public health measure for preventing dental decay. Studies prove water fluoridation reduces tooth decay by 20-40%, even in an era of widespread availability of fluoride from other sources, such as fluoride toothpaste. Community water fluoridation is the single most effective public health measure to prevent tooth decay and improve oral health over a lifetime for both children and adults.

The ADA is concerned that some opposed to community water fluoridation may be mischaracterizing its recent "Interim Guidance on Fluoride Intake for Infants and Young Children."

Opposition to fluoridation has existed since the initiation of the first community programs in 1945 and continues today, even with over 60 years of practical experience showing it to be safe and effective. While the arguments against fluoridation have remained relatively constant over the years, anti-fluoridationists use many different approaches that play on the fears of the public. Some opposed to fluoridation are mischaracterizing the ADA's "Interim Guidance on Fluoride Intake for Infants and Young Children" as a springboard in this continued effort.

As the leader of a science-based profession, the ADA continually reviews new information about fluoride's impact on health. On November 9, 2006, the ADA issued interim guidance on fluoride intake for infants and young children. Sound science was the driving force behind the release of the guidance. It was issued so parents, caregivers and health care professionals, who may be concerned about a possible increased risk of fluorosis, have some simple and effective advice on ways to reduce fluoride intake from reconstituted infant formula.

The appropriate amount of fluoride is essential to prevent tooth decay. But, like a lot of things in life, it is possible to get too much of a good thing. Fluoride intake above the recommended level for a child's age creates a risk for enamel fluorosis. Enamel fluorosis affects the way teeth look. In the vast majority of cases, fluorosis appears as barely noticeable faint white lines or streaks on tooth enamel and does not affect the function of the teeth. In fact, the effect is so subtle that, usually, only dental experts can spot tooth enamel fluorosis during a dental examination. It is important to know that even if infants are fed formula mixed with water containing fluoride, it doesn't mean they will develop enamel fluorosis. It means they might, that they are at increased risk. If parents are concerned about this possible increased risk, they may choose to use nonfluoridated water to reconstitute powdered or liquid concentrate infant formula.

The bottom line is that it is important to have fluoridated water. The interim guidance simply indicates that babies less than one year old need less fluoride than everyone else because they are so small. As part of its ongoing assessment, the ADA will convene workshops with government and other professional organizations involved in this issue to determine the best way to evaluate the scientific literature on this topic and formulate definitive recommendations on fluoride intake.

In November, 2006, the International Dental Federation (FDI), International Association for Dental Research (IADR) and the World Health Organization (WHO) convened a panel of experts on fluoride at WHO headquarters in Geneva, Switzerland. The international group of experts urged government, professional health organizations and other influential bodies to develop legislation, directives and programs to ensure access to fluoride for dental health in all countries. During the Global Consultation on "Oral Health through Fluoride," health experts expressed "their concern about growing disparities in dental health and the lack of progress in tackling the worldwide burden of tooth decay, particularly in disadvantaged populations." The 80 experts from 30 countries emphatically made clear that "prevention by using fluoride is the only realistic way of reducing this burden in populations."

The ADA reaffirms its support for water fluoridation and strongly urges that its benefits be extended to communities served by centralized water systems. Approximately 170 million people (or over two-thirds of the population) in the United States are served by public water systems that are optimally fluoridated. And that number continues to grow. In the past several years, more than 135 communities in 36 states decided to provide the benefits of fluoridation for their residents.

The ADA is not alone in its support for fluoridation. More than 100 national and international organizations recognize the public health benefit of fluoridation, including the American and Canadian Dental Associations, the U.S. Public Health Service, the American Medical Association, the American Cancer Society, the American Academy of Pediatrics and the World Health Organization. In fact, the Centers for Disease Control and Prevention (CDC) has proclaimed fluoridation as one of 10 great public health achievements of the 20th century. The CDC, in light of the release of the ADA's "Interim Guidance on Fluoride Intake for Infants and Young Children," continues to believe community water fluoridation is safe and healthy and promotes its use for people of all ages.

For more information about fluoride and fluoridation, visit the ADA's "Fluoride and Fluoridation" Web site at <http://www.ada.org/goto/fluoride>.

Sincerely,

A handwritten signature in black ink that reads "James B. Bramson, D.D.S." The signature is written in a cursive, flowing style.

James B. Bramson, D.D.S.
Executive Director